

good example

Application for State-Allowed Accommodations
March 2007 Michigan Merit Examination (MME) – Day 1
Receipt Deadline: January 10, 2007

MI

Important NOTE: Do NOT use this form to request ACT-approved test accommodations. Complete this form ONLY for a student who does not meet ACT's requirements or whose request has been denied by ACT. Scores achieved with State-Allowed Accommodations will be used for MME purposes but will NOT be reported to colleges, scholarship agencies, or any other entities.

This form is to be completed by a school official, such as counselor, special education teacher, or principal.

A. STUDENT INFORMATION (Please print clearly.)

Jones George 011-11-111
Student Name (Last, First, M.I.) Date of Birth (Mo/Day/Yr) Social Security Number (optional)
921 Arbor Anywhere MI 11111
Student Street Address or PO Box City State Zip Code
Anywhere HS ACT High School Code (required)
Name of High School the Student Attends and Where the Student Will Test
Name of Home High School (only if different from school attends) ACT High School Code (required)

B. REASON FOR REQUESTING STATE-ALLOWED ACCOMMODATIONS. Check one.

☒ (IEP) Individualized Education Program ☐ (504) Section 504 Plan ☐ (ELL) English Language Learner

C. TEST FORMAT REQUESTED. Check only one. All test books, including large type, and all answer folders are printed in English. (Braille, if applicable, is normally an ACT-approved accommodation. If a student needs Braille in addition to other State-approved accommodations, please call ACT before completing this application.)

English Formats

☒ Printed Booklet
☐ (01) Regular Type (10-point)
☐ (02) Large Type (18-point)
Audio Cassette
☐ (04) with Regular Type
☐ (05) with Large Type
Reader's Script
☐ (07) with Regular Type
☐ (08) with Large Type

English Formats (cont'd)

Audio DVD
☐ (DA) with Regular Type
☐ (DD) with Large Type
Video English
☐ (DG) DVD with Regular Type
☐ (DH) DVD with Large Type
☐ (VG) VHS with Regular Type
☐ (VH) VHS with Large Type

Spanish Formats

Audiocassette Spanish
☐ (4A) with Regular Type
☐ (5A) with Large Type
Video Spanish
☐ (DB) DVD with Regular Type
☐ (DE) DVD with Large Type
☐ (VB) VHS with Regular Type
☐ (VE) VHS with Large Type

Arabic Formats

Audiocassette Arabic
☐ (4B) with Regular Type
☐ (5B) with Large Type
Video Arabic
☐ (DC) DVD with Regular Type
☐ (DF) DVD with Large Type
☐ (VC) VHS with Regular Type
☐ (VF) VHS with Large Type

D. SCHOOL OFFICIAL'S SIGNATURE (required). I affirm the student named on this form attends this school. I have explained to the student and the student's parent/guardian that scores achieved with State-Allowed Accommodations will be reported **ONLY** to the state department of education for state assessment purposes and will **not** be reported to colleges, scholarship agencies, or any other entities.

Phillip Brown
School Official's Signature (may not be a relative of the student)

V. Principal
Print Official's Name and Title

E. STUDENT AND PARENT SIGNATURES (required). I understand that scores achieved with State-Allowed Accommodations will be reported **ONLY** to the state department of education for state assessment purposes and will **not** be reported to colleges, scholarship agencies, or any other entities. I understand that the student's notification of scores will be sent to the high school in August.

Student's signature (required if 18 or older)

Parent/legal guardian signature (required if student is under 18)

Date

NOTE: School official may sign for parent/legal guardian if verbal approval has been obtained by phone.

SUBMITTING THE APPLICATION. Incomplete or unsigned forms will not be processed. The request must be submitted with a signed Test Accommodations Coordinator Header. Address all requests from your school as a group to: ACT State Test Accommodations—MI, 301 ACT Drive, PO Box 4071, Iowa City, IA 52243-4071. All submissions must be received at ACT by January 10, 2007. (Keep a photocopy for your files.)